An Address By -

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I am grateful for the opportunity you have given me to tell you a little about the research program supported by the Tobacco Industry Research Committee. I also want to give you a brief picture of the current situation involving the tobacco and health situation.

I think all of you here can be proud of being part of an industry that was faced with a serious and controversial problem and undertook the approach decided on by the TIRC. Six years ago the sensational charges against smoking as a cause of lung cancer began to blow up way out of proportion to the actual facts. Your industry took a courageous and unique step by forming the Tobacco Industry Research Committee. This Committee enlisted the guidance and experience of prominent scientists and doctors who formed a Scientific Advisory Board.

The Board was given complete freedom of action and decision to develop and direct a broad, long-range research program into questions related to tobacco use and human health.

We have come a long way since that time in 1954. And, while I am optimistic and ever hopeful, I'm afraid we still have a long way to go before we have all the answers to cancer, heart disease and other serious public health problems.

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But scientists will get the answers eventually, and TIRC's research program is making valuable contributions to the store of scientific knowledge necessary to find the answers.

Since mid-1954 my colleagues and I on the Scientific Advisory Board have made available $4 million for research, and made grants to over 100 independent scientists in various hospitals, medical schools and laboratories throughout the country. As you know, neither the TIRC nor the Advisory Board does any research itself -- the work is done only by independent scientists who are assured complete freedom in doing their work and disclosing the results.

In our periodic meetings, the Board always reviews the scope and extent and direction of the research program for which we are responsible. We make regular reviews to determine which areas of research have been explored sufficiently and which areas need further investigation.

We have only one mandate in regard to this research program -- and that is to learn facts. For it is only with facts that science can come up with conclusions that meet the specific and necessary requirements that science itself has set.

Now I have been engaged in cancer research for almost more years than I care to remember -- 53 to be exact. And if there is one thing I have learned in all that time it is this: cancer is a highly complex disease and no one on earth knows what varied influences may release the controls on a human cell and turn it into the vigorous growth known as cancer.

I am not alone in this knowledge -- or lack of knowledge -- about the cause or causes of cancer. Many other scientists in the field of cancer research agree.

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Now, as you well know, there are those who charge that smoking causes lung cancer. These charges rely largely on statistical associations and have been widely publicized.

In recent years, the charges have been put to the test through intensive research. To date, they have not been proved in the scientific laboratory.

More important, from the scientific standpoint, there are literally hundreds of studies indicating that many factors are involved in the complex chain that may result in lung cancer.

No one really knows what part, if any, smoking plays in causing lung cancer. But the new evidence tends to throw doubt, rather than support, the charges against smoking as a major causative factor in this disease.

There are other important facts that you should be aware of:

1. While the reported number of lung cancer cases has been rising, the total death rate in the U.S. from major respiratory diseases -- including lung cancer -- has dropped to one-seventh what it was in 1900.

There are many reasons for the reported rise in number of lung cancer cases. We have a larger population, and a greater number of older people. Medical advances have enabled people cured of other lung ailments to live to the age when they are more prone to lung cancer. Doctors have better methods for diagnosing the disease. There is more precise reporting of cancer deaths. And there may well be other factors.

2. Another important fact to remember is that the vast majority of smokers never get lung cancer. And many non-smokers get it. This suggests there must be many factors involved in lung cancer and that the biochemical make-up of each individual is an important and perhaps the important factor.

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One factor that is being increasingly studied is air pollution. Substances that are said to cause cancer in animals have been detected in polluted air. And scientists in South Africa and New Zealand have found a higher lung cancer rate among emigrants from smoky industrialized England than in native whites in those two countries -- even though cigarette smoking is higher among the natives.

Other factors are also being studied, including: the role of viruses, hormones, infective lung damage, poor nutrition, exposure to occupational hazards and fumes from motor fuels.

3. A third fact to remember is this: chemical tests have not found any substance in tobacco smoke in concentrations sufficient to account for cancer in man -- or to account for reports of cancer in animals.

4. There have also been a number of attempts to produce lung cancer in animals by having them inhale tobacco smoke. These tests have consistently failed to produce cancer.

Tests of this kind are evidence toward the conclusion that tobacco smoke does not have any direct cancer-causing effect on animals or people.

5. Some of the most interesting research being done suggests that a person's use or non-use of tobacco may depend on the type of person he is. A recent study confirms that smokers are in general more active and outgoing than non-smokers. This research also suggests that some people may be more susceptible to such diseases as cancer, heart disease and ulcers because of their physiological and psychological makeup. This theory could account for the reported statistical association between smoking and those ailments -- without any cause and effect relationship whatsoever.

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6. Diseases of the heart and the arteries are also being extensively studied. To date, there is no evidence that smoking causes heart disease.

While we know that smoking and nicotine may have some physiological effects -- such as giving a slight "lift" -- science is finding that some of these effects may indeed be beneficial.

There are many other facts I could cite based on scientific research. The point I am trying to emphasize is that we do not know enough today about cancer and heart disease for anyone to say flatly that any single factor in our complicated lives is the guilty party in causing these diseases.

Scare campaigns concerning cancer and heart disease are harmful to everybody -- scientists and the general public alike. Some fund-raising organizations feel it necessary to tell the public they are getting something for the millions of dollars that are contributed. The statistics purporting to show an association between tobacco and lung cancer have -- as we know -- provided sensational news stories. Magazines and other journalistic media that play on emotions by using tobacco as a bogey-man are doing a disservice in arousing fear in people over seeing doctors about cancer. Fear kills -- it never cures.

Not long ago scientists were urging caution about extravagant claims being made for cancer "cures." Today, similar caution is needed regarding unfounded claims being made about "causes" of cancer. The need for such caution in accepting claims for either a cure or a cause is essential to the continued advance of knowledge.

In closing, let me stress that cancer and heart disease are basically of an entirely different nature than infectious diseases, which

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are fairly well controlled. Cancer and heart disease are in fact a series of related diseases of extreme complexities. They involve many complex mechanisms and have their origin within the person.

For the sake of scientific progress and the support of sound and basic scientific research, we must be extremely skeptical of claims for simple solutions to these diseases until our knowledge is certain. At present, it is not.

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